# **NOTICE**

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

#### These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit <a href="http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx">http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx</a>



Form **990** 

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2008

Open to Public Inspection

A Fo	r the	2008 ca	lendar yea	r, or tax year beginn		and ending 06-30-20	09		
		pplicable	Please	C Name of organization Brooklyn Institute of A					entification number
_	dress ch	_	use IRS label or	Doing Business As				11-167274 E Telephone nu	
	me cha	_	print or type. See	BROOKLYN MUSEUM				(718) 638-	5000
	ial retu		Specific Instruc-	Number and street (o 200 Eastern Parkway	rPO box if mail is	not delivered to street addr	ress) Room/suite	G Gross receipt	
	minatio		tions.	·				4	
	ended			City or town, state or Brooklyn, NY 112386		4			
j Api	olication	n pending					1		
				ne and address of Pr Id Iehman	incipal Officer			ıs a group return ates?	for
				stern Parkway					
т Та	x-exen	npt status		<u>rn, NY 112386052</u> ) (3) <b>◄</b> (insert no ) <b>「</b>	4947(a)(1) or \[ \bigsigma		1 ' '	ll affiliates include	, ,
 J W	eb sit	e: F ww		nuseum org				io," attach a list ip Exemption Nu	See instructions ) mber ►
<b>К</b> Тур	e of or	ganization	<b>✓</b> Corporat	ıon	on  other ►		<b>L</b> Year of Fo	ormation 1893 <b>M</b>	State of legal domicile NY
							<u>'</u>	•	
Pa	rt I								
	1			e organization's mis	-				
Governance			•			oklyn Museum holds or ord of exhibitions, sch		•	
<u> </u>									
ş	2	Check	this box	ıf the organızatıon d	scontinued its o	perations or disposed	of more than 2	25% of its assets	S
	3	Number	r of voting r	nembers of the gove	rning body (Part	:VI, line 1a)		з_	36
Activities &	4			_	_	ng body (Part VI, line 1	b)	_	36
Ě	5			nployees (Part V , lın					511
Į.	6			lunteers (estimate i				_	327
٩.				ness taxable income		, line 12, column (C)		/a _ 7b	1,890 -2,880
	В	Net um	erated busi	ness taxable income	e Holli Follii 990	-1, lille 34	Dri	or Year	Current Year
	8	Contri	butions and	d grants (Part VIII,	line 1h)			27,763,051	38,614,196
Tile	9			revenue (Part VIII,				3,483,794	2,322,535
Ravenue	10			ne (Part VIII, colum			2,470,642	-1,677,131	
ä	11	Other	revenue (P	art VIII, column (A)	, lines 5, 6d, 8c	, 9c, 10c, and 11e)		-3,355,149	2,268,198
	12		revenue—a	dd lines 8 through 1	1 (must equal P	art VIII, column (A), li	ne	30,362,338	41,527,798
	13	12) Grants	and simila	ar amounts paid (Par	t IX column (A)	lines 1 – 3)		30,302,330	41,327,798
	14			or for members (Part	, , ,	•			
	15					rt IX, column (A), lines	5-		
\$		10)						19,777,781	20,762,549
Expenses	16a			raising fees (Part IX		•		52,527	50,000
五	ь			penses, Part IX, column (		<u> </u>			
	17			(Part IX, column (A)		•		13,949,773	10,754,459
	18			•	-	X, line 25, column (A))		33,780,081	31,567,008
<b>波 27</b>	19	Keven	ue iess exp	enses Subtract line	: 10 from line 12	•	Donie	-3,417,743 ing of Year	9,960,790 End of Year
300 C	20	Total	accata /Dr	t X, line 16)				235,843,678	
455. Bak	21		•					· · · · ·	229,901,374
Net Assets or Fund Balances	21			Part X, line 26) d balances Subtrac	tling 21 from lin	ne 20		21,784,191	22,983,184
	22 1311		ature Blo		t iiile 21 iioiii iii	le 20		214,059,467	200,918,190
L G	- 7 7				ve examined this re	turn, including accompanyin	g schedules and	statements, and to t	the best of my knowledge
						er (other than officer) is bas			
Plea Sign		****	*** ature of office	ar			2010 Date	-05-26	
Here		[					Date		
			s tamagnı TF or print nam						
		Dropara	'c <b>h</b>			Date	Check If	Preparer's PTIN (	(See Gen Inst )
Paid		Preparer signature					self- empolyed 🕨		/
	arer's	Firm's na	ame (or yours	s <b>L</b> O'Connor Davies Mi	ınns & Dobbins II P		Simpoly Cu F		
Use (		ıf self-er	nployed), and ZIP + 4	60 East 42nd Street				EIN 🕨	
		audicss,	and AIF T 4					Phone no 🕨 (2	12) 286-2600
Mav	the IR	S discus	s this retu	New York, NY 101 rn with the preparer		See instructions) .			✓ Yes 「No

# Part III Statement of Program Service Accomplishments (See the instructions.)

<b>1</b> See A	Briefly describe the organization's mission dditional Data Table				
2	Did the organization undertake any s the prior Form 990 or 990-EZ? . If "Yes," describe these new services		ervices during the year	which were not listed on	┌ Yes ┌ No
3	Did the organization cease conducting services?			nducts any program	┌ Yes ┌ No
4	If "Yes," describe these changes on S Describe the exempt purpose achiev Section 501(c)(3) and (4) organization others, the total expenses, and rever	ements for each of th ons and 4947 (a)(1)	trusts are required to r	report the amount of grants	
4a	(Code ) (Expenses some process of the Brooklyn Museum studies, preserves are every corner of the globe. In FY 2009, eleving the source of the globe. In FY 2009, eleving the source of the Museum's exhibitions were organized for tour from the Brooklyn Museum, Tree of Paradise. Je audiences from across the nation to experie	nd exhibits a vast and cor en permanent collection i Near Eastern, African, Asia collections including Ame Brooklyn Museum Collec wish Mosaics from the Ro	mprehensive collection that installations helped a diverse an, Contemporary, Decorating and Egyptian art are lictions. Landscapes from the oman Empire, and Winslow	e audience of over 340,000 visito ive, Egyptian, European, Feminist nternationally renowned Addition Age of Impressionism To Live Fo	rs explore this extraordinary , and Native American arts and ally, a number of travelling orever Egyptian Treasures from
4b	(Code ) (Expenses s Special ExhibitionsThe Brooklyn Museum pidexhibitions maintains its role as a relevant a extended the cultural and art historical them audience and a broader public, and attracted	oneers the presentation a and meaningful resource a nes of the Museum's colle	nd interpretation of the visu at the forefront of arts scho ection, helped to bridge the	larshıp  In FY 2009, eleven specıa	l exhibitions developed and
4c	(Code ) (Expenses seed to explore the collection and special exhibit connection to the visual arts. Nationally-recommuseum in the nation with 40% who self-ice.	rograms including prograr tions on view, use the ar ognized programs such as	ts to strengthen classroom l s First Saturdays have helpe	learning, engage in hands-on art- ed the Museum build one of the m	making, and build a life-long nost diverse audiences of any
	(Code ) (Expenses :	1,429,666	ıncludıng grants of \$	) (Revenue \$	84,838 )
			······ 9 9.4	, (Nevellae y	
4d	Other program services (Describe (Expenses \$	in Schedule O) including grants o	f\$	) (Revenue \$	)
4e	Total program service expenses \$	25,281,78	2 Must equal Part IX.	Line 25, column (B).	

Part IV	Chec	klist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νo
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νo
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νo
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo

	rt V Statements Regarding Other IRS Filings and Tax Compliance			Page
Pa	Statements Regarding Other IRS Finings and Tax Comphanice		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		165	140
	of U.S. Information Returns. Enter -0- if not applicable			
_	1a 64			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported in 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country			
5a	Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		No
	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	5c		
6a	Tax Shelter Transaction?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7a	Yes	
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	/a	res	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year   7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)............ <b>11b</b>			
		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the vear			

Yes

11

Νo

# Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A.	Governing	Body and N	Managemen	t	

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, processes, or changes in Schedule O. See instructions.	desc	rıbe the cı	rcumstances	5,			
1a	Enter the number of voting members of the governing body	1a			36			
ь	Enter the number of voting members that are independent	1b			36			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?				$\overline{}$	2		Νo
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management control over management control over management duties.					3		Νo
4	Did the organization make any significant changes to its organizational documents s filed? $\ \ .$	ınce t	he prior F	orm 990 wa	15	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization	nızat	ıon's asse	ts?		5	Yes	
6	Does the organization have members or stockholders?					6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect governing body?					7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholder	ers, o	r other pe	rsons? .		7b		Νo
8	Did the organization contemporaneously document the meetings held or written action year by the following	ns ur	ndertaken	during the				
а	the governing body?					8a	Yes	
ь	each committee with authority to act on behalf of the governing body?				. [	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?					9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the acaffiliates, and branches to ensure their operations are consistent with those of the or					9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was the describe in Schedule O the process, if any, the organization uses to review the			•		10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A	, who	cannot b	e reached a	ıt 🗆	-	•	

the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed NY, NJ
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. 

  upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization anna lee
  200 Eastern Parkway
  Parkly NY 113386053

Brooklyn, NY 112386052 (718) 638-5000

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- \* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i		(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

### Part VII Continued

(A) Name and Title  (B) A verage hours per week  (C) Trustee  Office  Office	Former Highest compensated employee Key employee	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
				-
				1
	<del>                                     </del>			
1b Total	<u> </u>	1,588,185	<u> </u> 	110,126

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►8

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		Νο
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	( <b>B</b> ) Description of services	(C) Compensation
Trystate Mechanical Inc 471 McLean Avenue Yonkers, NY 10715	CONSTRUCTION contractor	1,957,694
TNS Management Services INC 64-55 74th Street Glendale, NY 11385	construction CONTRACTOR	1,802,279
Gilbane Building Co 2 Rector Street New York, NY 10121	Construction Management	1,289,054
PORT MORRIS TILE & MARBLE CORP 1285 OAKPOINT AVENUE BRONX, NY 104746914	TILE CONTRACTOR	918,180
ideal construction TILARY STREET BROOKLYN, NY 11201	CONSTRUCTION contractor	908,061
2 Total number of independent contractors (including those in 1) who refrom the organization	• • • • • • • • • • • • • • • • • • • •	21

# Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	<b>(C)</b> Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512,513, or 514
	1a	Federated can	npaigns 1a			Revenue		312, 313, 61 311
nts nts	ь	Membership d	ues	843,851				
Contributions, gifts, grants and other similar amounts	С	Fundraising ev	<b>1b</b> /ents	420,159				
ifts, araa	d	Related organi	1c izations1d					
s, g ∭	e	_	nts (contributions) 1e	26,113,391				
ion I si	f	All other contribut	tions, gifts, grants, and	11,236,795		1	i	i
ibut Other	-	sımılar amounts r	not included above					
ntrí do	g		rıbutıons ıncluded ın					
လို	h		166,274 es 1a-1f)		38,614,196			
	ļ. <u>"</u>	Total (Add III)		Business Code				
ən	2a	Exhibit Fees		900,099	985,033	985,033		
меп	ь	Admissions and to	ours	900,099		743,909		
a. He	с	edu pgms & space use 900,099			•	508,755		
, M.C.	d	parking lot Fees		812,930	· ·	,	1,890	82,948
Ser.	e			, -			, -	· -
ran	f	All other progr	ram service revenue					
Program Service Revenue	g	Total. Add line ► \$ 2,322,535	es 2a-2f					
	3		come (including divi	dends, interest				
		other similar a	amounts)		2,594,711			2,594,711
	4	Income from inve	estment of tax-exempt be	ond proceeds				
	5	Royalties .						
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inco	ome or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	13,377,577					
		assets other than inventory						
	b	Less cost or other basis and	17,649,419					
	c	sales expenses Gain or (loss)	-4,271,842					
	d	Net gaın or (lo	ss)	_	-4,271,842			-4,271,842
	8a			. *				
	oa	events (not in						
<u> </u>		Ψ	4,880 ns reported on line					
nue		1c) See Part :	IV, line 18					
₹ev			e G ıf total exceeds	420,159				
er	ь		xpensesb					
Other Revenue	с		(loss) from fundraisi		-69,343			-69,343
_	9a	Gross income		<u>*</u>				
		activities See Complete Sched	e part IV , line 19 dule G if total					
		exceeds \$15,00	00					
	ь	loco duretti	a Vnancas h					
	C		xpenses <b>b</b> (loss) from gaming a	l activities				
				<b>b</b>				
	10a	Gross sales of returns and all	finventory, less lowances .					
			а	1,685,900				
	b	Less cost of		439,503	1 246 202	1 246 207		
	С	Net income or Miscellaneou	(loss) from sales of	Inventory	1,246,397	1,246,397		
	11a	Loan fee and N		900,099	759,970	759,970		
	b	deaccessions		900,099		213,074		
	С	Fee for borrow		900,099	118,100	118,100		
	d	All other rever						
	e e	Total. Add line						
	12	Tatal D	. A	\$ 1,091,144	41,527,798	4,575,238	1,890	-1,663,526
	**	8c,	<b>a.</b> Add lines 1h, 2g, 3		11,321,130	7,373,230	1,050	1,003,320
	]	9c, 10c, and 1	l1e	- ▶				

# Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				).
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,180,545	938,509	188,762	53,274
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	14,446,402	11,793,998		665,340
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	674,064	458,364	188,738	26,962
9	Other employee benefits	3,044,124	2,047,428	878,938	117,758
10	Payroll taxes	1,417,414	963,841	396,876	56,697
11	Fees for services (non-employees)				
а	Management				
b	Legal	155,964	4,670	151,294	
c	Accounting	103,370	3,095	100,275	
d	Lobbying				
е	Professional fundraising See Part IV, line 17	50,000			50,000
f	Investment management fees	166,583	166,583		
g	Other	1,310,770	1,100,433	137,546	72,791
12	Advertising and promotion	577,140	526,491	880	49,769
13	Office expenses	2,499,068	2,114,324	150,731	234,013
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	564,781	312,900	75,578	176,303
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,351,948	3,113,578	224,315	14,055
23	Insurance	282,429	80,788	201,641	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	acquisition of works of	948,641	948,641		
ь	Exhibitions fees and ca	239,807	239,807		
c	research and curatorial	218,726	201,207	245	17,274
d	miscellaneous	181,040	113,013	26,241	41,786
e	design materials	154,192	154,112	80	
f	All other expenses	,			
25	Total functional expenses. Add lines 1 through 24f	31,567,008	25,281,782	4,709,204	1,576,022
26	Joint Costs. Check   If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		,,	,,== .	, -,

Part X	Balance	Sheet

						<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing				456,305	1	397,045
	2	Savings and temporary cash investments			•	9,499,030		4,978,160
	3	Pledges and grants receivable, net			•	1,973,154	_	4,147,834
	4	Accounts receivable, net				1,287,532	4	2,942,151
	5	Receivables from current and former officers, directors, trustee				1,207,502	-	2,042,101
		other related parties Complete Part II of Schedule L					5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of			) and		6	
	7	Notes and loans receivable, net			7			
	8	Inventories for sale or use				522,916	8	470,119
ş	9	Prepaid expenses and deferred charges				893,626	9	271,941
Assets	10a	Land, buildings, and equipment cost basis	10a	169.9	917,567			
•	ь	Less accumulated depreciation Complete Part VI of	104	100,0	717,007			
	"	Schedule D	10Ь	28,0	87,920	127,377,137	10c	141,829,647
	11	Investments—publicly traded securities				77,057,077	11	59,296,260
	12	Investments—other securities See Part IV, line 11 Complete Part IV, li	Part VI	I of		16,776,901	12	15,232,195
	13	Investments—program-related See Part IV, line 11 Complete of Schedule D.	Part VI	TII .			13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule	•			0		336,022
		D				225 042 670	15	229.901.374
	16	Total assets. Add lines 1 through 15 (must equal line 34)				235,843,678		
	17	Accounts payable and accrued expenses .		2,929,547	17	4,462,619		
	18	Grants payable				25.262	18	12 505
	19	Deferred revenue				25,362	19	43,595
Ø.	20	Tax-exempt bond liabilities					20	
Eg	21	Escrow account liability Complete Part IV of Schedule D		•			21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
		persons Complete Part II of Schedule L	•				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .	•			23	
	24	Unsecured notes and loans payable					24	
	25	Other liabilities Complete Part X of Schedule D				18,829,282	25	18,476,970
	26	<b>Total liabilities.</b> Add lines 17 through 25				21,784,191	26	22,983,184
S ⊕ S		Organizations that follow SFAS 117, check here ▶   and come through 29, and lines 33 and 34.	plet e	lines 27				
Balance	27	Unrestricted net assets				119,445,717	27	99,602,457
<u>г</u>	28	Temporarily restricted net assets				55,710,623	28	71,852,953
Fund	29	Permanently restricted net assets				38,903,147	29	35,462,780
Ē		Organizations that do not follow SFAS 117, check here ▶ ┌ a	nd con	nplet e				
5		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds	•				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other f	unds				32	
Met	33	Total net assets or fund balances				214,059,487	33	206,918,190
	34	Total liabilities and net assets/fund balances				235,843,678	34	229,901,374
Pa	rt XI	Financial Statements and Reporting						

Dart YT	Financial	Statements	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νo
ь	If "Yes," did the organization undergo the required audit or audits?	3b		

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As Filed Data -

DLN: 93493146001100

**Employer identification number** 

OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Brook	lyn Inst	itute of Arts and	d Sciences						<b>,</b> ,		
									-1672743		
	rt I			harity Status (to be co					Instruct	ions)	
The	organı	zation is not	a private found	ation because it is (Please	check onl	ly <b>one</b> org	anızatıon )	)			
1		A church, c	onvention of ch	iurches, or association of ch	urches de	escribed in	Section 1	L70(b)(1)(	(A)(i).		
2	Г	A school de	escribed in <b>Sec</b> l	t <b>ion 170(b)(1)(A)(ii).</b> (Attac	ch Schedu	ıle E )					
3	Γ	A hospital	A hospital or a cooperative hospital service organization described in <b>Section 170(b)(1)(A)(iii).</b> (Attach Schedule H)								
4	Γ	A medical i	research organı	zatıon operated ın conjunctı	on with a l	hospital d	escribed ii	n Section :	170(b)(1)	(A)(iii). E	nter the
		hospital's r	name, city, and	state							
5	$\Gamma$	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								rıbed ın	
		Section 170	D(b)(1)(A)(iv).	(Complete Part II )							
6	Γ	A federal, s	tate, or local g	overnment or governmental	unıt descr	ıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).		
7	굣	Anorganiza	ation that norm	ally receives a substantial p	art of its s	support fro	m a gove	rnmental u	ınıt or fron	n the gene	eral public
		described i	n Section 170(l	o)(1)(A)(vi) (Complete Par	tII)						
8	$\Gamma$	A communi	ity trust describ	oed in <b>Section 170(b)(1)(A)</b>	<b>(vi)</b> (Com	nplete Par	tII)				
9	Γ	An organiza	ation that norm	ally receives (1) more than	331/3% o	fits supp	ort from co	ntribution	ıs, membe	rship fees	, and gross
		receipts fro	m activities re	ated to its exempt functions	s—subject	to certair	n exceptio	ns, and (2	) no more	than 331/	'3% of
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess sectio	on 511 tax	c) from bu	sinesses
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III	)		
10	$\sqcap$	Anorganiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ct ion 509(	( <b>a)(4).</b> (Se	e instruc	tions )
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of									
			e or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See <b>Section 509(a)(3).</b> Check								
		the box that describes the type of supporting organization and complete lines 11e through 11h  a									
_	_		• •				, -	*			
е	1	•		rtify that the organization is agers and other than one or			-				•
		section 50		agers and other than one or	more pub	iici, supp	orteu orga			111 5 6 6 1 1 1	. 5 5 5 (d)(1) 5.
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organizatio <u>n,</u>
		check this									Г
g		following pe		as the organization accepted	d any gift	or contrib	ution from	any of the			
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes No
			·	ng body of the the supported		_	·			11g	
			· -	erson described in (i) above	_					11g(	
			•	ty of a person described in (		bove?				11g(	
h				nation about the organizatio			supports				<u> </u>
				•	-	•					
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mount of
		orted		(described on lines 1-9		ation in		nızatıon		ation in	support?
	0 rgar	nization		above or IRC section		listed in		) of your		rganized	
				(See Instructions))	your go	verning ment?	supp	ort	in the	US?	
Yes No Yes No							-				

Total

# Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	keu the box of	11 IIIIe 3, 7, 01	o of Part I.)				
Ρι	ıblic Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	<b>(d)</b> 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not	41,095,106	35,584,703	26,677,851	27,815,016		40,663,380	171,836,056
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf							
3	The value of services or facilities furnished by a governmental unit to the	1,322,186	1,622,402	1,704,448	1,699,888		1,984,304	8,333,228
	organization without charge	1,322,100	1,022,102	1,701,110	1,055,000		1,501,501	0,555,220
4	Total. Add line 1-3	42,417,292	37,207,105	28,382,299	29,514,904		42,647,684	180,169,284
	The portion of total contribution by each	12,117,232	37,207,103	20,302,233	25,511,501		12,017,001	100,103,201
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							23,212,141
	shown on line 11, column							
	(f)							
6	Public Support subtract line 5 from line							156 057 142
	4							156,957,143
Te	otal Support							_
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	42,417,292	2,723,523	28,382,299	29,514,904	4	12,647,684	180,169,284
8	Gross income from interest, dividends,							
	payments received on securities loans,	2,224,441	2,723,523	3,014,913	2,470,642		2,594,711	13,028,230
	rents, royalties and income from similar	2,224,441	2,723,323	3,014,913	2,470,042		2,394,711	13,020,230
	sources							
9	Net income from unrelated business							
	activities, whether or not the business is							
	regularly carried on							
10	Other income Do not include gain or loss							
	from the sale of capital assets (Explain in							
	Part IV )	+		+				193,197,514
11	Total Support (Add lines 7 through 10)					1		
12	Gross receipts from related activities, etc	(See Instruction	s)			12		25,696,003
13	First Five Years. If the Form 990 is for the	organızatıon's fır	st, second, third	d, fourth, or fifth	tax year as a 5	01(c)(		. —
	organization, check this box and <b>stop here</b>							<b>►</b> □
	omputation of Public Support Perc							
14	Public Support Percentage for 2008 (line 6	column (f) divid	ed by line 11 co	olumn (f))		14		81.240 %
15	Public Support Percentage for 2007 Sched	ule A, Part IV-A	, lıne 26f			15		<b>79.210</b> %
16a	33 1/3% Test - 2008. If the organization die	d not check the b	oox on line 13. a	ind line 14 is 33	1/3% or more.	check	this box	
	and <b>stop here.</b> The organization qualifies as				2,070 01 111010,			<b>▶</b> ▽
ь	33 1/3% Test - 2007. If the organization di		-		.5 is 33 1/3% o	r more	, check th	ıs
	box and <b>stop here.</b> The organization qualifie			•			•	<b>▶</b> ┌
17a	10% Facts and Circumstances Test - 2008.	If the organization	on did not check	a box on line 1:	3, 16a, or 16b a	nd lin	e 14 ıs 10	% or
	more, and if the organization meets the "fac	ts and circumst	ances" test, che	eck this box and	stop here. Exp	laın ın	Part IV ho	
	organization meets the "facts and circumst							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fac							
	the organization meets the "facts and circu							<b>►</b>
18	Private Foundation. If the organization did	not check the bo	ox on line 13, 16	a, 16b, 17a or :	17b, check this	box a	nd see	. —
	instructions							<b>▶</b> ┌

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	<b>(e)</b> 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

**SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Open to Public Inspection

OMB No 1545-0047

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities) Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B ◆ Section 527 organizations complete Part I-A only If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities) ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) ◆ Section 501(c)(4), (5), or (6) organizations complete Part III Name of the organization Employer identification number Brooklyn Institute of Arts and Sciences 11-1672743 Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.) Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.) Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ☐ Yes □ No If the organization incurred in a section 4955 tax, did it file Form 4720 for this year? ┌ No Was a correction made? If "Yes," describe in Part IV Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.) Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (b) Address (e) A mount of political (a) Name (c) EIN (d) A mount paid from contributions received filing organization's and promptly and internal funds If none. directly delivered to a enter-0-

separate political organization If none, enter -0-

Grassroots non-taxable amount

Grassroots lobbying expenditures

Grassroots ceiling amount (150% of line d, column (e))

P	To be completed by (election under sec						768		
	Check   If the filing organization Check   If the filing organization					•			
<u>B</u>	Check If the filing organization  Limits on Lo  (The term "expenditure	(a) Filing Organization's Totals	<b>(b)</b> A ffiliated Group Totals						
1a	Total lobbying expenditures to influe	otal lobbying expenditures to influence public opinion (grass roots lobbying)							
ь	Total lobbying expenditures to influe	nce a legislative be	ody (dırect lobby	ring)					
c	Total lobbying expenditures (add line	es 1a and 1b)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures	(add lines 1c and 1	d)						
f	Lobbying nontaxable amount Enter columns—		e following table	ın both					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying none		is:					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% c	of the excess over \$	1,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1	,500,000					
	Over \$17,000,000	\$1,000,000							
g	Grassroots nontaxable amount (ente	r 25% of line 1f)							
h	Subtract line 1g from line 1a Enter-	0- ıf lıne g ıs more	than line a						
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	han line c		L				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h o	r line 11, did the	organization file	Form 4720 repo	orting	┌─ Yes		
	(Some organizations tha columns below. S		on 501(h) ele	ection do not	have to con		ne five		
	Lobb	ying Expendit	ures During 4	4-Year Avera	ging Period		1		
	Calendar year (or fisca beginning in)	l year	<b>(a)</b> 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	<b>(e)</b> ⊤otal		
2a	Lobbying non-taxable amount								
ь	Lobbying ceiling amount (150% of line 2a, column(e))								
	: Total lobbying expenditures								
					1	1	I		

Part II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form
	<b>5768 (election under section 501(h)).</b> (See the instructions for Schedule C for details.)

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
ь	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		C	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo		
i	Other activities If "Yes," describe in Part IV	Yes		64,620	
j	Total lines 1c through			64,620	
	11				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes" enter the amount of any tax incurred under section 4912				
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		ſ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Dat	+ TII-A. To be completed by all organizations exempt under section $501(c)/A$	Section	501/6	\(5\ or	

# Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

# Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
а	Current Year	2a \$
b	Carryover from last year	2b\$
c	Total	2c \$
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$
5	Tayable amount of lobbying and nolitical expenditures (line 2c total minus 3 and 4)	5 ¢

#### Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Part II-B, Line 11	Explanation of Other Lobbying A ctivities	In FY 2009, the Museum retained Metcalf Federal Relations on a limited consulting contract. The limited contract was intended to maintain a relationship between Metcalf and the Museum with the option of entering into a full service contract in the future Metcalf did not represent the Museum or attempt to advance legislation or capital and expense projects at the Federal level In FY 2009, the Museum retained Manatt, Phelps and Phillips trepresent the Museum in connection with governmental relations matters before the New York State Legislature and Executive branches, including securing operational and capital assistance of the Museum from the State of New York

1 \$

Part IV Supplemental I	nformation	
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

For Paperwork Reduction Act Notice, see the Intructions for Form 990

DLN: 93493146001100

OMB No 1545-0047

Schedule D (Form 990) 2008

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

**Supplemental Financial Statements** 

Open to Public

	me of the organization poklyn Institute of Arts and Sciences		Employer identification number
Pa	ort I Organizations Maintaining Donor A organization answered "Yes" to Form 99		unds or Accounts. Complete if the
	organization answered Tes to Form 9.	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the		or advised Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beinpermissible private benefit?		
Рa	rt II Conservation Easements. Complete	ıf the organization answered "Yes" to	o Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat  Preservation of open space	ion or pleasure) Preservation of an Preservation of ce	historically importantly land area
2	Complete lines 2a-2d if the organization held a qual on the last day of the tax year	ified conservation contribution in the form	Held at the End of the Year
а	Total number of conservation easements		2a
Ь	Total acreage restricted by conservation easement	ts	2b
c	Number of conservation easements on a certified h	istoric structure included in (a)	2c
d	Number of conservation easements included in (c)	2d	
3	Number of conservation easements modified, transfe		ed by the organization during
	the taxable year ►	· · · · · · · · · · · · · · · · · · ·	
4	Number of states where property subject to conserv	ation easement is located ►	
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		ations, and Yes No
5	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year <b>►</b>
7	A mount of expenses incurred in monitoring, inspect	ng, and enforcing easements during the ye	ear ► \$
8	Does each conservation easement reported on line $\frac{1}{170(h)(4)(B)(i)}$ and $\frac{1}{170(h)(4)(B)(ii)}$ ?	2 (d) above satisfy the requirements of sec	Yes No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial	
aı	Complete if the organization answered		or Other Similar Assets.
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its file.	l for public exhibition, education or researc	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research ii	•
	(i) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> - \$
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		• •
а	Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$
ь	Assets included in Form 990. Part X		<b>b</b>

Cat No 52283D

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Trea</u>	sures, or Othe	<u>er Similar A</u>	ssets	(continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne foll	owing that	are a significant	use of its colle	ction	
а	▼ Public exhibition		d	~	Loan or e	xchange program:	s		
b	Scholarly research		e	$\Gamma$	Other				
c	✓ Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	/ further th	ne organization's e	xempt purpose	ın	
_	Part XIV				,	<b>.</b>			
5	During the year, did the organization solicit of						mılar	<b></b>	<b></b>
Dov	assets to be sold to raise funds rather than t		•				warad "Vac" t	Yes	
Pai	Trust, Escrow and Custodial A Part IV, line 9, or reported an an					yanızadıdı ansv	vereu res i	O FOLIII	990,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ns or other assets	not	☐ Yes	∏ No
Ь	If "Yes," explain why in Part XIV and comple	te the following tabl	е						
							A	mount	
c	Beginning balance					<b>1</b> c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	•							
Pai	t V Endowment Funds. Complete	f the organization	n ans	were					
		(a)Current Year	(b	)Prior	Year (c	:)Two Years Back (d	Three Years Back	( <b>e)</b> Fou	r Years Back
1a	Beginning of year balance	92,983,667							
b	Contributions	1,665,704							
c	Investment earnings or losses	-19,425,346							
d	Grants or scholarships	5.054.607							
e	Other expenditures for facilities and programs	5,854,687							
f	Administrative expenses								
g	End of year balance	69,369,338							
2	Provide the estimated percentage of the yea	r end balance held a	ıs						
a	Board designated or quasi-endowment	35 090 %							
ъ	Permanent endowment ► 50 980 %								
	12.040.0%								
c 3a	Term endowment • 13 940 %  Are there endowment funds not in the posses	ssion of the organiza	ation :	that a	re held an	d administered for	r the		
54	organization by	oston of the organize	201011	ciide e	ire ireia air			Υe	s No
	(i) unrelated organizations						3	a(i)	No
	(ii) related organizations							ı(ii)	No
	If "Yes" to 3a(II), are the related organizatio	•						3b	
4	Describe in Part XIV the intended uses of the tVI Investments—Land, Buildings					Dawk V. June 10			
Раг	t VI Investments—Land, Buildings	s, and Equipme	nt. 5		•	1	T		
	Description of investment				Cost or othe		(c) Depreciatio	n <b>(d)</b>	Book value
<b>1a</b> l	and						n		
<b>b</b> E	Buildings								
	easehold improvements			1		90,094,056	1,207,7	70	88,886,286
c L							<b> </b>	-	00,000,200
d E	quipment					6,230,654	<u> </u>	95	
<b>d</b> E	quipment		•			6,230,654 73,592,857	<u> </u>		331,859 52,611,502 141,829,647

(a) Description of security or cateory		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
ancıal derivatives and other financıal products		
osely-held equity interests		
her INVESTMENT SEcurities	15,232,195	
	+	
(Column (h) should squal Form COO, Part V, sel (P) line 12	<b>b</b> 15 323 105	
tal. (Column (b) should equal Form 990, Part X, col (B) line 12)	15,232,195	
rt VIII Investments—Program Related. S	See Form 990, Part X, line 13.	
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
	_	
otal. (Column (b) should equal Form 990, Part X, col (B) line 13)		
art IX Other Assets. See Form 990, Part X, (a) Desc		(b) Book value
(a) Dest	. Tiption	(b) Book value
tal. (Column (b) should equal Form 990, Part X, col.(B) lin	ne 15.)	
Part X Other Liabilities. See Form 990, Par	t X, line 25.	·
(a) Description of Liability	(b) A mount	
deral Income Taxes		
crued Postretirement Benefits	18,476,970	
	+	
_		
	<del> </del>	

	ule D (Form 990) 2008  XI Reconciliation of C	hange in Net Assets from For	m 990 to Financial Statemer	nts	Page <b>4</b>
1	Total revenue (Form 990, Part	VIII, column (A), line 12)		1 2	41,527,798 31,567,008
3	Total expenses (Form 990, Par Excess or (deficit) for the year	, , , , , , , , , , , , , , , , , , , ,		3	9,960,790
	Net unrealized gains (losses) o Donated services and use of fa			5	-17,454,398
	Investment expenses			6	
7 8	Prior period adjustments Other (Describe in Part XIV)			8	352,311
9 10	Total adjustments (net) Add III	nes 4 - 8 per financial statements Combine line	es 3 and 9	9	-17,102,087 -7,141,297
Part 1	XIII Reconciliation of R	evenue per Audited Financial er support per audited financial statem	Statements With Revenue p	er R	<u> </u>
2	A mounts included on line 1 bu	it not on Form 990, Part VIII, line 12			20,404,047
a b	Net unrealized gains on invest Donated services and use of f	acılıtıes	2a -17,454,398 . 2b 1,984,304		
c d	Recoveries of prior year grants Other (Describe in Part XIV)		. 2c 573,726		
e	Add lines 2a through 2d .			2e 3	-14,896,368
3 4		0, Part VIII, line 12, but not on line <b>1</b>			41,361,215
a b	Investment expenses not incl Other (Describe in Part XIV)	uded on Form 990, Part VIII, line 7b	. 4a 166,583 . 4b		
c 5	Add lines <b>4a</b> and <b>4b</b> Total Revenue Add lines <b>3</b> an		rt I line 12 )	4c 5	166,583 41,527,798
_	XIII Reconciliation of E	xpenses per Audited Financia r audited financial statements	I Statements With Expenses		<u> </u>
2	A mounts included on line 1 bu	it not on Form 990, Part IX, line 25	1 1		33,330,433
a b	Donated services and use of formal prior year adjustments		<b>2a</b> 1,984,304 <b>2b</b>		
c d	Losses reported on Form 990 Other (Describe in Part XIV)	, Part IX, line 25	<b>2c 2d</b> 573,726		
e 3	Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> .			2e 3	2,558,030 31,400,425
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:			31,400,423
a b	Investment expenses not incl Other (Describe in Part XIV)	uded on Form 990, Part VIII, line 7b	4a 166,583 4b		
c 5	Add lines <b>4a</b> and <b>4b</b> Total expenses Add lines <b>3</b> a		art I. line 18 )	4c 5	166,583 31,567,008
Part	XIV Supplemental Int	formation		l	
	V, line 4, Part X, Part XI, line 8	scriptions required for Part II, lines 3, , Part XII, lines 2d and 4b, and Part X	III, lines 2d and 4b		and 2b,
Part II	Ident if ier	Return Reference	Explanat The Museum's art collection is mad	e avai	
			and the public to encourage and expappreciation of art through a prograieducation and research. Component	m of p	ublic exhibitions,
			collection, which have been acquire contributions, are not recognized as	d thro asse	ugh purchases and ts on the statement of
			financial position Purchases of coll the years in which the items are acc unrestricted or temporarily restricte	quired	as decreases in
			with donor restrictions on the asset items Contributed collection items	s used	d to purchase the
			financial statements because the M collection items for sale. Proceeds	from d	eaccessions are added
			to temporarily restricted net assets other items for the collection, excep in the same year which are reported	t for s	similar items acquired
Part II	II, Line 4		The Brooklyn Museum holds one of comprehensive art collections in the	the la	rgest and most
			first purchase by the institution-Asi Harvest in the Wilderness", acquire	d ın 18	855 with a bequest
			from founder and benefactor August collections have been the central m goals edifying, instructing, and insp	eans	of accomplishing its
			creating a bridge between the arts a its roots to the Brooklyn Apprentice	s Libr	ary (founded in 1823),
			and eventually evolving into the Bro Sciences, the Brooklyn Museum beg when construction began in 1893 o	gan co	ollecting in earnest
			McKim, Mead, and White Planned a building in the world and under cons	s the l truction	largest museum on through the 1920s,
			the new building required greatly ex subscriptions supported several ma Tissot "Life of Christ" series (1900	Jor pu	rchases, including the
			(1909), and the Barye bronzes (1918) saw unprecedented growth of the co	lo) TI	he early 20th century
			curator Stewart Culin as curator of e	undat	ion for today's
			collections of African, Asian and Na North and South America The Egyp the donation of the Charles Edwin W	tıan c	ollection began with
			an endowment that allowed the Mus strength, including the purchase, in	1932	, of the Egyptian
			collection of the New-York Historica of the strongest Egyptian collection Vincent Lockwood's arrival on the b	s in th	ne country Luke
			marked the beginning of a collection and the costume collection was gre	atly ex	xpanded shortly
			thereafter to provide resources for A paintings collections-the first collections of the first c	tions	begun in the mid-
			collecting In 1934, the Museum na from general collections (including s	cienc	e and natural history)
			to art Today the Brooklyn Museum' and broad, including works of paintii photography and sculpture from Am	ngs, pi	rınts, drawıngs,
			arts and design of America, and Eurarts of the Islamic world, African art	ope, t t, art c	he arts of Asia, the of the Pacific Islands,
			and the art of ancient Egypt and the chronology covered by these collec ancient world to the present, and the	tions	stretches from the
			active in collecting contemporary a collections at the Brooklyn Museum	rt and ı are c	feminist art. The ared for by a
			professional staff of curators and co continually being refined to better s acquisitions are guided by a collect	erve o	our mission New
			adopted by the Board of Trustees an Collections Committee and the cura	nd rev	iewed by the
			basis New acquisitions are considered following criteria. Will the work be in	nmedı	ately useful in the
			galleries and will it expand the visit work be transformative for the colle- becomes part of the canon for which	ction?	Will it be a work that
			remembered? Can it be used to illur collection area, and bridge the gaps	betwe	een collections and
			cultures? Is it an object of true exc good condition? Does it have special already in the collection? Will it inci	al reso	onances with works
			existing collections by making them FY09 eleven permanent collection i	n more nstalla	e understandable? In ations helped a diverse
			audience of over 340,000 visitors of Museum's world-class collections of exhibitions of the highest quality de	A dditi	onally, eleven special
			cultural and art historical themes fo the Museum's rich collections and a	cused umed	l on and supported by to bridge the cultural,
			racial, ethnic and economic gap bet traditional audience and a broader p beyond Using these permanent and	ublic	ın Brooklyn and
			innovative education and public pro K-12 students, teachers, families a	grams nd adı	including programs for ults helped an
			estimated 150,000 visitors expand The Brooklyn Museum is dedicated preservation, exhibition, and growth	to the	continued study,
			serve its mission to act as a bridge heritage of world cultures, as embod	betw lied in	een the rich artistic its collections, and
			the unique experience of each visito public as a dynamic, innovative and learning through the visual arts		I
Part V	, Line 4	Description of Intended Use of Endowment Funds	The board in compliance with the ap will appropriate as much of net appr	•	<u>-</u>
			considering the Museum's long and and anticipated financial requiremen	short- nts, ex	-term needs, present opected total return on
			its investments, price level trends a conditions. Under the Museum's spi of the adjusted average market valu	ending	policy, a percentage
			measured at March 31 of each of th preceding years is made available of	e thre n eac	e ımmedıately h July 1 to support
			current operations of the Museum a activities as designated by the Boal during the year ended June 30, 200	rd The	e amount approved
			or \$6,497,736 Due to market cond only \$5,854,687 of the approved a	litions	, the Museum withdrew
Part X	_	Description of Uncertain Tax Positions Under FIN 48	The Museum has deferred adoption accounting for uncertain income tax	of FAS	SB guidance for nons until the date of
			its June 30, 2010 financial stateme accounting policy is to provide liability is probable	lities f	for uncertain tax
			Management is not aware of any vio organization exempt from income ta	latıon xes, n	of its tax status as an nor of any exposure to
			unrelated business income tax. Conmanagement, adoption of FIN 48 re	ıs e que gardın	ently, in the opinion of ng liabilities for
Part Y	I, Line 8 - O ther A djustments		uncertain tax positions should not he had been het periodic postretirement benefit in the periodic postretirement benefit		
	II, Line 2d - Other		cost of goods sold 439503 SPECI (REPORTED ON FORM 990 PART)	ALE\	VENTS EXPENSES
<u> </u>	III, Line 2d - Other		COST OF GOODS SOLD 439503 EXPENSES (REPORTED ON FORM	SPEC	CIAL EVENTS
			134223	C-l	dule D (Form 990) 2008

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DLN: 93493146001100

**Employer identification number** 

OMB No 1545-0047

**SCHEDULE F** (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Brooklyn Institute of Arts and Sciences

▶ Attach to Form 990. Complete if the organization answered "Yes" to

Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Open to Public

11-1672743 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award No For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (b) Number of (c) Number of region (by type) (i.e., **(f)** Total expenditures in is a program service, employees or (a) Region offices in the fundraising, program services, describe specific type of region agents in region grants to recipients located in region service(s) in region the region) 0 PROGRAM SERVICES The exhibition Annie 36,842 Europe Leibovitz A Photographer's Life, 1990-2005' is one of the museum's traveling exhibitions offered on tour to other institutions to share with their audiences Itis a exhibition of approximately 200 photographs by the artist, Annie Leibovitz, focusing on both her assignment work as a professional photographer and personal photographs of her family and friends showing there can be two sides to one life. The Brooklyn Museum presented 'Annie Leibovitz' in the fall of 2006, several US venues then hosted the exhibition before it traveled to Europe The exhibition was presented in Europe by the Maison Europeenne de la Photographie, Paris (June 17 - September 14, 2008), the National Portrait Gallery, London (October 16, 2008 -February 1, 2009), C/O Berlin (February 20 - May 24, 2009), Alcala 31, Madrıd (June 19 -September 27, 2009), the KunstHausWein, Vienna (October 28, 2009 -January 31, 2010), and Fotografiska, Stockholm (May 20 - September 12, 2010) 36,842 Totals . . . . ▶

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							-
	_							_
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		1					
		+					
			•				

Schedule F (Form 990) 2008

Complete this part t	o provide the information required	ın Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation

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**SCHEDULE G** (Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990. Part IV.

Internal Revenue Service	lines 17, 18, or 19, and by organ	izations tha	t enter mor	O-EZ, line 6a.	Inspection		
Name of the organization Brooklyn Institute of Arts	and Sciences				Employer identi	fication number	
Part I Fundraisin	g Activities. Complete if the	organiz	ation a	nswered "Yes" to F	orm 990, Part IV,	line 17.	
1 Indicate whether the a	ns ns	any of tl	he followi e   f   g	Solicitation of non-	government grants ernment grants		
or key employees lis  b If "Yes," list the ten	have a written or oral agreement wited in Form 990, Part VII) or enti highest paid individuals or entities to least \$5,000 by the organization	ty in con s (fundrai	nection v sers) pui	with professional fund rsuant to agreements	raising activities? under which the fund		
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo conti contribi	er have dy or rol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
DCM INC	MEMBERSHIP AND CAPITAL TELEMARKETING	1.00	No	78,025	50,000	28,025	
Total		<b>b</b>					

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or 3 licensing

NY,NJ

b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?	Pai	rt II	Fundraising Events. Com more than \$15,000 on Form					r repor	ted
Comparison   Com					<b>(b)</b> Event #2	(c) O ther Events	(Add c	ol <b>(a)</b> th	hrough
1   Gross receipts					(event type)	(total number)		:ol <b>(c)</b> )	
Some sevenue (line 1	Φ.	1		· ,,,,		(cotal mamber)		48	5,039
Some sevenue (line 1	∯ j		·	420.150	<u> </u>				0.150
## Cash Prizes	æ			420,133					.0,159
S Non-cash Prizes		3		64,880					4,880
By Direct expense summary Add lines 4 through 7 in column (d).  Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than 515,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/finstant bingo/progressive bingo (c) Other gaming (Add od) (a) through col (c))  1 Gross revenue (a) (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  4 Rent/facility costs (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  5 Other direct expenses (b) Pyes (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  7 Direct expenses summary Add lines 2 through 5 in column (d) Pyes (b) Py		4	Cash Prizes						
By Direct expense summary Add lines 4 through 7 in column (d).  Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than 515,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/finstant bingo/progressive bingo (c) Other gaming (Add od) (a) through col (c))  1 Gross revenue (a) (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  4 Rent/facility costs (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  5 Other direct expenses (b) Pyes (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  7 Direct expenses summary Add lines 2 through 5 in column (d) Pyes (b) Py	Ses	5	Non-cash Prizes						
By Direct expense summary Add lines 4 through 7 in column (d).  Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than 515,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/finstant bingo/progressive bingo (c) Other gaming (Add od) (a) through col (c))  1 Gross revenue (a) (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  4 Rent/facility costs (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  5 Other direct expenses (b) Pyes (b) Pull tabs/finstant bingo/progressive bingo (d) Total gaming (Add od) (a) through col (c))  7 Direct expenses summary Add lines 2 through 5 in column (d) Pyes (b) Py	Der	6	Rent/Facility costs						
## Section of the summary Combine lines 3 and 8 in column (d).    Caming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Caming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Caming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Caming. Complete if the organization line in the organization perates gaming activities in each of these states?   Cash prizes	Δi Ti	7	Other direct expenses	134,223	3			13	4,223
## Section of the summary Combine lines 3 and 8 in column (d).    Caming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Caming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Caming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.    Caming. Complete if the organization line in the organization perates gaming activities in each of these states?   Cash prizes	ē	R	Direct expense summary Add lin	es 4 through 7 in column	(d)			13	4,223
Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.  (a) Bingo (b) Pull tabs/Instant bingo/progressive bingo  1 Gross revenue	Δ			_					9,343
bingo/progressive bingo  1 Gross revenue	Par	t III	Gaming. Complete if the or	ganization answered			orted mo		
2 Cash prizes	evenue			(a) Bıngo	bingo/progressive	(c) O ther gaming			
3 Non-cash prizes	~	1	Gross revenue						
4 Rent/facility costs		2	Cash prizes						
4 Rent/facility costs	bens	3	Non-cash prizes						
6 Volunteer labor	ច ស្គ	4	Rent/facility costs						
7 Direct expense summary Add lines 2 through 5 in column (d)	౼	5	Other direct expenses						
8 Net gaming income summary Combine lines 1 and 7 in column (d)		6	Volunteer labor	l '		'_ · · · · · · · · · · · · · · ·			
Penter the state(s) in which the organization operates gaming activities  Is the organization licensed to operate gaming activities in each of these states?		7	Direct expense summary Add line	s 2 through 5 in column (	d)				
9 Enter the state(s) in which the organization operates gaming activities  Is the organization licensed to operate gaming activities in each of these states?		8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)				
a Is the organization licensed to operate gaming activities in each of these states?								Yes	No
b If "No," Explain  10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?									
Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  If "Yes," Explain  Does the organization operate gaming activities with nonmembers?				gaining activities in each	Torthese states		. 9	3	+
b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?	_		,,						
b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?									
11 Does the organization operate gaming activities with nonmembers?	10a			licenses revoked, suspen	ided or terminated durin	g the tax year?	10	<u>a</u>	_
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	Ь	17 1	res, Explain						
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity									
	11	Doe	s the organization operate gaming	activities with nonmembe	rs?		1:	<u>.                                    </u>	<u> </u>
	12								

13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ▶		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address 🟲		
16	Gaming manager information	_	
	Name ▶		
	Gaming manager compensation 🟲 \$		
	Description of services provided 🟲	-	
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year		

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DLN: 93493146001100

OMB No 1545-0047

**Schedule J** (Form 990)

## **Compensation Information**

2008

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization **Employer identification number** Brooklyn Institute of Arts and Sciences 11-1672743

Pa	rt I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	First class or charter travel	Γ	Housing allowance or residence for personal use		ĺ	
	Travel for companions	Γ	Payments for business use of personal residence		ĺ	
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a v provision of all the expenses described above? If "			1b		
2	Did the organization require substantiation prior to	reimburs	sing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executiv	e Directo	or, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t					
	Compensation committee	<b>▽</b>	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	, Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	ental non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must c	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	•	·	8		No

Cat No 50053T

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
arnold LEHMAN (1)	416,876		116,380	5,908	12,864	552,028	273,000
judith frankfurt (1)				5,235	12,864	217,077	105,861
CYNTHIA MAYEDA (I)	207,981			5,863	6,812	220,656	107,365
CHARLES DESMARAIS (1)				4,575	6,820	180,303	87,833
(i)							
(ii	)						
(i)							
(ii	)						
(i)							
(ii	)						
(i)							
(ii	)						
(i)							
(ii	)						
(i)							
(ii	)						

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

# **Non-Cash Contributions**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Employer identification number Name of the organization Brooklyn Institute of Arts and Sciences 11-1672743

Pa	TIL Types of Property							
		(a) Check ıf	<b>(b)</b> Number of Contributions	<b>(c)</b> Revenues reported on Form 990, Part VIII, line	<b>(d)</b> Method of de reven	etermi	ning	
		applicable		1 g				
	Art—Works of art	X	243	0				
	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
9	Securities—Publicly traded .	X	1	166.274	FAIR MARKET VAL	 U Е		
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15								
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (describe)	Х	1					
26	Other (describe)							
27	Other (describe)							
28	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828		ar for contributions for	29			5
							Yes	No
30a	During the year, did the organiza hold for at							
	least three years from the date of for the entire holding period? .			not required to be used for $\epsilon$	exempt purposes	30a		No
b	If "Yes", describe the arrangem	ent in Part I	I					
31	Does the organization have a gif	t acceptand	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	<del>-</del>	to solicit, process, or sell r	non-cash	32a	Yes	
h	If "Yes", describe in Part II					Jea	163	
	If the organization did not report	revenues i	n Column (c) for a type of n	roperty for which Column (s	a) is			
	checked, describe in Part II		(3) 101 4 2) 50 01 5		-,			

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	ReturnReference	Explanation
Third Party Use	Part I, Line 32b	The Brooklyn Museum occasionally contracts with commercial auction houses such as Sotheby's or Christie's to sell non-cash contributions of works of art or personal property. These may be works that have been part of the collection for years, but that have been recently deaccessioned, or they may, less frequently, be works of art or personal property donated to the Museum with the specific intention that they be sold to realize funds in cash. The Brooklyn Museum has standing contracts with some auction houses outlining terms and conditions for this purpose, with other auction houses, terms and conditions are negotiated on a case-by-case basis.
Non Reporting of Revenue	Part I, Line 33	Purchases of collection items are recorded in the years in which the items are acquired as decreases in unrestricted or temporarily restricted net assets in accordance with donor restrictions on the assets used to purchase the items

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(Form 990)

**SCHEDULE 0** 

Department of the Treasury

Internal Revenue Service

# **Supplemental Information to Form 990**

DLN: 93493146001100 OMB No 1545-0047

Inspection

Name of the organization Brooklyn Institute of Arts and Sciences

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Employer identification number

11-1672743

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	The Brooklyn Museum engages in a number of additional activities to help its visitors engage with and support its work. This includes providing information and products that help its diverse constituents to explore its wideranging collection and special exhibitions as well as dynamic education programs designed for visitors of all ages, and efforts to identify and manage Museum income from diverse sources. Expenses \$ 1429666 including grants of \$ 0. Revenue \$ 84838

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 5		The Museum discovered during this fiscal year that a former payroll manager, who had resigned in May of 2008, had diverted significant assets of the Museum (estimated at approximately \$650,000 over a period of several years). The Museum, led by its Audit Committee, promptly took appropriate corrective actions on advice of outside professionals, including (a) determining the nature and extent of the potential problem, (b) adopting appropriate measures and internal controls to minimize the risk of future occurrences, (c) reporting the matter to law enforcement authorities, (d) advising funding agencies, and (e) assuring that no current employees were implicated. The Museum has been reimbursed a significant sum by insurance and hopes to receive some additional restitution as a result of related law enforcement proceedings.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Brooklyn Museum's Board of Trustees has delegated responsibility and oversight for the form 990 to the Finance Committee. The form 990 is prepared by the Museum's auditors with direct input from the Museum's administration. An electronic draft of the form 990 is supplied to the entire Board of Trustees for comment Additionally, all members of the Board of Directors are invited to the Finance Committee meeting at which the final draft of the form 990 is reviewed prior to being filed by with the IRS. The Board's Treasurer serves as the chair of the Finance Committee. Participating in the meeting are the Board Chair and various other officers including the Museum Director and other senior administrators.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c		The Brooklyn Museum has in place a conflict of interest policy. The policy and disclosure guidelines are distributed to all Trustees on an annual basis along with a conflict of interest questionnaire and disclosure form that they must complete and sign. Completed questionnaires are reviewed by the Deputy Director for Development and Board Chairperson. Any new conflicts are brought to the attention of the Director and if necessary to the Board Chairperson. Trustees with conflicts must recuse themselves from meetings and/or the decision-making process, as appropriate

lden	tifier	Return Reference	Explanation
Form 9 Part VI, Section 15	′ .		A Compensation Committee of trustees exists and is a subcommittee of the Finance Committee members. This committee is responsible for determining compensation for senior level administrative and curatorial staff. Compensation is based upon comparable data and functionally comparable positions in similarly situated organizations nationwhide as well as market-driven data for functions that fall outside museums. The Executive Director's salary is determined by a long standing contract approved by senior trustees. In July of 2008, non-union staff salary increases averaging to 3%, based upon merit, where granted. No compensation increases where made in July 2009.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The Brooklyn Museum's governing documents and financial statements are made available to the public upon request. Additionally, its IRS form 990 is available to the public online at www guidestar org

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		The Brooklyn Museum's Audit Committee assumes responsibility for the oversight of the audit of its financial statements and selection of an independent accountant. These processes have not changed from the previous year

ldentifier	Return Reference	Explanation
Schedule G, Part I, Line 2b, Column (v)	Explanation of Fundraising Payments	CONSULTING FEE \$5,000 WEEKLY MANAGEMENT FEES \$30 PER CALLING HOUR DCM WAS RETAINED TO CONDUCT A TELEFUNDRAISING CAMPAIGN ON BEHALF OF THE BROOKLYN MUSEUM FOR THE PURPOSE OF SOLICITING GIFTS FROM NEW DONORS/MEMBERS AND RENEWING AND UPGRADING CURRENT DONORS/MEMBERS

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 1	Organization's Primary Exempt Purpose Continued	The mission of the Brooklyn Museum is to act as a bridge betw een the rich artistic heritage of w orld cultures, as embodied in its collections, and the unique experience of each visitor. Dedicated to the primacy of the visitor experience, committed to excellence in every aspect of its collections and programs, and drawing on both new and traditional tools of communication, interpretation and presentation, the Museum ams to serve its diverse public as a dynamic, innovative and welcoming center for learning through the visual arts. Founded in 1823 as the Brooklyn Appentices' Library Association, today's Brooklyn Museum holds one of the most comprehensive and wide-ranging collections in the nation, enhanced by a distinguished record of exhibitions, scholarship, and service to the public. The Museum's vast and comprehensive holdings span 5,000 years of human creativity from cultures in every corner of the globe. The Museum's administration and programmatic activities are overseen by 32 volunteer. Trustees, 270 full-time and 38 part-time staff, and a corps of over 295 interns, guides, and volunteers. In recent years, an increasingly competitive nonprofit environment has forced museums to measure their impact in a number of different ways. In addition to serving as beacons of enlightenment and ideas, museums have also proven integral to the economic health and stability of local communities across the country, providing a shared space for education, inspiration, and tolerance. This growing realization of their own importance has spurred museums to pursue new audiences, expand programming, and build new partnerships. At the arc of this curve is the Brooklyn Museum Driving Local Development. Over the past ten years, the Museum has transformed itself from a slumbering outer-borough giant into a dynamic innovator and leader among New York City cultural institutions. With a long-term goal to serve an audience whose demographics represent those of Brooklyn and New York City at large, the Museum serves one of the youngest

prominence as a local and national model for the role that cultural institutions can and should play in our local

communities and neighborhoods

# Software ID: Software Version:

**EIN:** 11-1672743

Name: Brooklyn Institute of Arts and Sciences

#### Form 990, Part VII - Section Aaa

DOSEPH G Finnerty III , EXEC	Form 990, Part VII - Section Aaa										
Name and Title			Position (check all that apply)							<b>(E)</b>	(F)
BARBara Knowles Debs , vice chair         5 00		Average hours per	Individual Trustee or Errector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-	Reportable compensation from related organizations (W- 2/1099-	amount of other compensation from the organization and related
BARBARA MANFREY, VOGELSTEIN -	NORMAN M FEINBERG , CHAIR	7 00	Х		Х				0	0	0
VICE CHAIR	BARbara Knowles Debs , vice chair	5 00	Х		Х				0	0	0
SECRETARY		5 00	Х		х				0	0	0
RICHARD M CASHIN , TRUSTEE		5 00	Х		х				0	0	0
ANDREW B COHEN , TRUSTEE	JOHN S tamagnı , TREASURER	5 00	Х		Х				0	0	0
SAUNDRA CORNWELL, exec committee/TRUSTEE         3 00	RICHARD M CASHIN , TRUSTEE	2 00	Х						0	0	0
Committee/TRUSTEE	ANDREW B COHEN , TRUSTEE	2 00	Х						0	0	0
KATHERINE P DARROW, TRUSTEE       2 00		3 00	Х						0	0	0
KATHERINE B Desai , TRUSTEE	ELISSA CULLMAN , TRUSTEE	2 00	Х						0	0	0
BLAIR EFFRON , EXEC	KATHERINE P DARROW, TRUSTEE	2 00	Х						0	0	0
COMMITTEE/TRUSTEE	KATHERINE B Desai , TRUSTEE	2 00	Х						0	0	0
DOSEPH G Finnerty III , EXEC		3 00	Х						0	0	0
COMMITTEE/TRUSTEE 3 00 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	FREDerick Elghanayan , TRUSTEE	2 00	Х						0	0	0
RICHARD H HOChMAN , TRUSTEE       2 00	• • • • • • • • • • • • • • • • • • • •	3 00	Х						0	0	0
STEPHANIE INGRASSIA , EXEC   COMMITTEE/TRUSTEE   SOO   X	CHARLYNN Goins , TRUSTEE	2 00	Х						0	0	0
COMMITTEE/TRUSTEE	RICHARD H HOChMAN, TRUSTEE	2 00	Х						0	0	0
JOANNE MINIERI , TRUSTEE		3 00	Х						0	0	0
RICHARD W MOORE , TRUSTEE       2 00	ERIKA KLAUER , TRUSTEE	2 00	Х						0	0	0
STEVEN A NEWBORN , TRUSTEE         2 00 X         0         0         0           OTIS PRATT Pearsall , TRUSTEE         2 00 X         0         0         0           LESLIE A PUTH , TRUSTEE         2 00 X         0         0         0           EDWARD S REID , TRUSTEE         2 00 X         0         0         0           TRACEY RIESE , TRUSTEE         2 00 X         0         0         0           JONATHAN ROSEN , TRUSTEE         2 00 X         0         0         0           ROBERT S RUBIN , TRUSTEE         2 00 X         0         0         0           ELIZABETH A SACKLER , EXEC         3 00 X         0         0         0           COMMITTEE/TRUSTEE         2 00 X         0         0         0           BERNARD SELZ , TRUSTEE         2 00 X         0         0         0	JOANNE MINIERI , TRUSTEE	2 00	Х						0	0	0
OTIS PRATT Pearsall , TRUSTEE 2 00 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	RICHARD W MOORE , TRUSTEE	2 00	Х						0	0	0
LESLIE A PUTH , TRUSTEE       2 00 X       0       0       0         EDWARD S REID , TRUSTEE       2 00 X       0       0       0         TRACEY RIESE , TRUSTEE       2 00 X       0       0       0         JONATHAN ROSEN , TRUSTEE       2 00 X       0       0       0         ROBERT S RUBIN , TRUSTEE       2 00 X       0       0       0         ELIZABETH A SACKLER , EXEC       3 00 X       0       0       0         COMMITTEE/TRUSTEE       2 00 X       0       0       0         BERNARD SELZ , TRUSTEE       2 00 X       0       0       0	STEVEN A NEWBORN , TRUSTEE	2 00	Х						0	0	0
EDWARD S REID , TRUSTEE       2 00 X       0       0       0         TRACEY RIESE , TRUSTEE       2 00 X       0       0       0         JONATHAN ROSEN , TRUSTEE       2 00 X       0       0       0         ROBERT S RUBIN , TRUSTEE       2 00 X       0       0       0         ELIZABETH A SACKLER , EXEC       3 00 X       0       0       0         COMMITTEE/TRUSTEE       3 00 X       0       0       0         BERNARD SELZ , TRUSTEE       2 00 X       0       0       0	OTIS PRATT Pearsall , TRUSTEE	2 00	Х						0	0	0
TRACEY RIESE , TRUSTEE       2 00 X       0       0       0         JONATHAN ROSEN , TRUSTEE       2 00 X       0       0       0         ROBERT S RUBIN , TRUSTEE       2 00 X       0       0       0         ELIZABETH A SACKLER , EXEC       3 00 X       0       0       0         COMMITTEE/TRUSTEE       3 00 X       0       0       0         BERNARD SELZ , TRUSTEE       2 00 X       0       0       0	LESLIE A PUTH , TRUSTEE	2 00	Х						0	0	0
JONATHAN ROSEN, TRUSTEE         2 00 X         0         0         0           ROBERT S RUBIN, TRUSTEE         2 00 X         0         0         0           ELIZABETH A SACKLER, EXEC         3 00 X         0         0         0           COMMITTEE/TRUSTEE         3 00 X         0         0         0           BERNARD SELZ, TRUSTEE         2 00 X         0         0         0	EDWARD S REID , TRUSTEE	2 00	Х						0	0	0
ROBERT S RUBIN , TRUSTEE         2 00 X         0         0         0           ELIZABETH A SACKLER , EXEC         3 00 X         0         0         0           COMMITTEE/TRUSTEE         2 00 X         0         0         0           BERNARD SELZ , TRUSTEE         2 00 X         0         0         0	TRACEY RIESE , TRUSTEE	2 00	Х						0	0	0
ELIZABETH A SACKLER , EXEC COMMITTEE/TRUSTEE 3 00 X  BERNARD SELZ , TRUSTEE 2 00 X  0 0 0	JONATHAN ROSEN , TRUSTEE	2 00	Х						0	0	0
COMMITTEE/TRUSTEE 3 00 X 0 0 0 0	ROBERT S RUBIN , TRUSTEE	2 00	Х						0	0	0
		3 00	Х						0	0	0
DANNY SIMMONS, TRUSTEE 2 00 X 0 0	BERNARD SELZ , TRUSTEE	2 00	Х						0	0	0
<u> </u>	DANNY SIMMONS , TRUSTEE	2 00	X						0	0	0

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Ada											
		(C) Position (check all that apply)								(F)	
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
DIANE H STEINBERG , TRUSTEE	2 00	Х						0	0	0	
ADAM WEISS , TRUSTEE	2 00	Х						0	0	0	
HOWARD WOLFSON, TRUSTEE	2 00	Х						0	0	0	
SHELLY FOX AARONS , EXEC COMMITTEE/TRUSTEE	3 00	Х						0	0	0	
MARTIN BAUMRIND , EXEc COMMITTEE/TRUSTEE	3 00	Х						0	0	0	
LESLIE L BELLER , TRUSTEE	2 00	Х						0	0	0	
arnold LEHMAN , director	35 00			Х				533,256	0	18,772	
judith frankfurt , dep dir/asst treasurer	35 00			Х				198,978	0	18,099	
CYNTHIA MAYEDA , DEPUTY DIRECTOR	35 00				x			207,981	0	12,675	
CHARLES DESMARAIS , DEPUTY DIRECTOR	35 00				х			168,908	0	11,395	
kevın stayton , chief curatoR	35 00					Х		126,298	0	10,085	
judith paska , vice director	35 00					Х		125,534	0	7,611	
FRANTZ VINCENT , VICE DIRECTOR	35 00					Х		115,844	0	15,337	
KENNETH MOSEr, VICE DIRECTOR	35 00		<u> </u>			Х		111,386	0	16,152	

#### Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The Brooklyn Museum's mission is to act as a bridge between the rich artistic heritage of world cultures, as embodied in its collections, and the unique experience of each visitor. Dedicated to the primacy of the visitor experience; committed to excellence in every aspect of its collections and programs; and drawing on both new and traditional tools of communication, interpretation and presentation; the Museum aims to serve its diverse public as a dynamic, innovative and welcoming center for learning through the visual arts.[See continuation of the Organization's Mission Statement on Sheet 4 of Schedule O]

ldentifier	Return Reference	Explanation
FORM 990, BOX B EXPLANATION FOR FILING AN AMENDED TAX RETURN		THE DISCUSSION RELATED TO PART VI, SECTION B, LINE 15 REGARDING THE COMPENSATION REVIEW PROCESS WAS UPDATED TO INCOPORATE THE PROPER REPORTING PERIOD AND WAGE INCREASE INFORMATION FOR NON-UNION STAFF

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Cat No 51056K

Schedule O (Form 990) 2008

Software ID:

**Software Version:** 

**EIN:** 11-1672743

Name: Brooklyn Institute of Arts and Sciences

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
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